CHAPTER 10

ESTABLISHING AN EFFECTIVE OBQI SYSTEM

A.   INTRODUCTION

In this manual, the key steps of OBQI have been introduced—with particular emphasis on the activities of outcome enhancement. Agencies have learned how to interpret the outcome reports, how to select target outcome(s) for further investigation, how to conduct this investigation, and the essential steps of developing and implementing a plan of action designed to improve (or reinforce) the care processes that led to outcome results. Key aspects of involving staff of the entire agency in the outcome enhancement activities and of essential training content have also been presented. These are the "tools" to fully implement OBQI in the agency. An agency's commitment to focusing on and continuously improving the quality of care provided will, in large part, determine the degree of success that can be achieved in this implementation.

B.   AGENCY COMMITMENT TO QUALITY IMPROVEMENT

The outcome enhancement process of OBQI described in this manual is based on the key principles of continuous quality improvement (CQI). Agencies already using these principles strive to continuously and accurately measure the effectiveness of the care that clinicians provide and to focus on problematic processes, rather than individuals, when improvement is indicated. They use systematic methods to investigate opportunities for improvement and to implement activities designed to enhance quality. OBQI combines these core principles with sophisticated information gathering and analysis methods, while maintaining the focus on patient care.

If an agency already has an active quality improvement (QI)/performance improvement (PI) program, it will find that the outcome enhancement processes mesh very well with current procedures and activities. In this case, the goal becomes one of integrating the new outcome enhancement processes into the current program. Agencies have reported this is an easy step to accomplish and often provides a high degree of focus to their QI/PI program.

On the other hand, if the agency is new to CQI principles, a bit more effort may be necessary to implement OBQI. The agency's commitment to providing high quality care and willingness to truly examine the care provided will assist in establishing the patient-centered culture necessary to support OBQI. Implementing OBQI requires an agency-wide commitment to regularly evaluating performance (in terms of patient outcomes) and to improving patient care on an ongoing basis. For many agencies, this requires a shift from a culture based on

administrative needs to a culture with a focus on patient needs. In OBQI, the focus is on the patient, not on agency staff.

C.   EFFECTS OF FOCUS ON OUTCOMES

The fundamental purpose of OBQI is to improve patient outcomes by modifying and reinforcing specific aspects of patient care. Emphasizing precise and objective data collection, clarity in understanding outcomes, and objectivity in interpreting outcome reports are each important in their own right. However, the primary purpose of home care is to help patients achieve outcomes that would not be achieved if natural progression of disease and disability alone had taken place (or, at times, to help patients achieve selected outcomes at a more accelerated pace than would have been the case under natural progression). Decision making within the agency should, therefore, focus on how best to provide care as a result of collecting information on and monitoring outcomes. Care investigations and decisions on how to change and improve care should be triggered by outcome findings.

Quality improvement based on outcomes requires a number of new activities and a new way of thinking. Implementing OBQI requires a systematic evaluation of current work processes and identification of processes that need to change. Even agencies that always use QI principles may find that they need to re-engineer some of their current processes to implement OBQI. As with any new approach, some time is likely needed to get used to this. Once the agency has gained experience with OBQI, a number of activities and thought processes will become more routine. Techniques will be identified to streamline and improve approaches to conducting process-of-care investigations and to the writing and implementation of action plans.

When the outcome philosophy takes hold in an agency, staff, supervisors, and administrators begin to think differently about the work they do. Clinical staff assess the impacts of their care practices on patients and search for evidence- and research-based best practices that reach effective outcomes in an efficient manner. As providers of care begin to consciously think about the linkages between aspects of care delivery and outcomes, new training and educational needs are likely to emerge. Inservices, continuing education, and staff meetings are likely to focus on outcomes, patient care, and process-of-care analysis in both formal and informal ways.

Enormous opportunities exist for agencies that utilize outcome information in their QI programs and for management decisions. The agency's focus on outcomes begins to pervade a variety of administrative decisions. When clinical outcome data are evaluated in conjunction with financial data, for example, the result is powerful information for management decisions about cost-effective

care. A continuing focus on how interventions and specific personnel allocation affect outcomes also becomes of particular interest. Agency decisions thus become more and more patient-centered.

D.   EXPECT EVOLUTION IN YOUR OBQI SYSTEM

Agencies must build flexibility into the system as they implement and maintain an OBQI approach. OBQI will not work by itself. Providing home care is a dynamic process. Consequently, attaining optimal patient outcomes is dynamic, and OBQI must be regarded as a process that itself requires monitoring and continual improvement. The way information is used and the manner in which patients will benefit and also use outcome findings will continue to change over time. OBQI processes should be evaluated regularly, and refinements made as needed. Agencies must acknowledge and build flexibility in this system as they implement and maintain an OBQI approach.

Networking with colleagues and maintaining awareness of industry publications is necessary to keep abreast of new developments and to share ideas about successfully maintaining and adapting OBQI. By enhancing their own internal processes and sharing their experiences, agencies have an opportunity to contribute to the ongoing development and national evolution of OBQI.

OBQI represents a turning point in the evolution of home health care in the United States, allowing agencies to demonstrate the effectiveness of the services they provide in a valid, objective manner using OASIS-derived reports. Agencies who choose to take advantage of the opportunities presented to them through OBQI will have powerful information for many decisions concerning cost-effective, high quality patient care. This information will in turn serve the future recipients of care in an ongoing application of continuous quality improvement.